

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE			
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP
1	7						51				
2		1					52				
3		1					53				
4		1					54				
5		2					55				
6		2					56				
7		2					57				
8		2					58				
9		2					59				
10		2					60				
11		2					61				
12		2					62				
13		2					63				
14		2					64				
15		2					65				
16		2					66				
17		2					67				
18		2					68				
19		2					69				
20		1					70				
21		1					71				
22		1					72				
23		1					73				
24		1					74				
25		1					75				
26	1						76				
27		1					77				
28		1					78				
29		1					79				
30		1					80				
31		1					81				
32		1					82				
33	1						83				
34		1					84				
35		1					85				
36		1					86				
37		2					87				
38		2					88				
39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	3						TOTAL IND.				
TOTAL DEP.	51						TOTAL DEP.				
TOTAL CLAIMS	54						TOTAL CLAIMS				